PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 8, 2004										Application or Docket Number			
		CLAIMS	AS FILED	- PART	ı			SMALL EI		<u> </u>			
U.S. NATIONAL STAGE FEES			(Colu	ımn 1)	<del>,</del>	(Column 2)		TYPE		O		R THAN - ENTITY	
-		L STAGE FEES						RATE	FEE	7	RATE	FEE	
<u> </u>	SIC FEE	·		SMALL ENT. ≈ \$ 150		RGE ENT. = \$ 300	1	BASIC FEE		70	R BASIC FEE	+	
EX.	AMINATION F	FEE	(4) = \$ (	Satisfies PCT Article 33(1)- (4) = \$ 50 / \$ 100		other situations = \$ 100 / \$ 200	1	EXAM. FEE	<del> </del>	1.	EXAM. FEE		
SEARCH FEE			ALL other of	U.S. is ISA = \$50 /\$ 100 ALL other countries = \$200 /\$400		other situations = \$ 250 / \$ 500		SEARCH FEE		1	SEARCH FEE		
FEI	E FOR EXTRA	SPEC. PGS.	mi	minus 100 =		/50 =		X \$ 125 =	<del> </del>	7	X \$ 250 =		
LO.	TAL CHARGE	ABLE CLAIMS	3 m	3 minus 20 = *				X \$ 25 =		- OF	-		
NDEPENDENT CLAIMS			10	) minus 3 = *		The Adequate control control of the		X \$ 100 =		-   -	7 7 7 7 7		
IUI	LTIPLE DEPE	NDENT CLAIM P	RESENT		<u>· · ·                                 </u>			+\$ 180 =	<del> </del>	OR		<del> </del>	
lf	the difference	e in column 1 k	s less than zer	ro, enter "0'	" in co	olumn 2		TOTAL	<b> </b>	OR	7 000		
								IOIAL	<u> </u>	OR	TOTAL		
	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)					(Column 3)		SMALL E	NTITY	OR	OTHER SMALL I		
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	]	RATE .	ADDI- TIONAL	
AMENDMENT A	Total	*	Minus	**		= -	Ī	X \$ 25 =		OR	X \$ 50 =	FEE	
	Independent	<u>  •                                   </u>	Minus	***		-	ı	X \$ 100 =		OR	X \$ 200 =	<u> </u>	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ŀ	+ \$ 180 =	· · · · · · ·	OR			
							Ļ	TOTAL ADDIT.		OR	+ \$ 360 =	·	
	••							FEE		JOK	FEE		
7		(Column 1)	T	(Column		(Column 3)	_			_		ν	
		REMAINING AFTER AMENDMENT		NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA	İ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		-		X \$ 25 =		OR	X \$ 50 =		
1	ndependent		Minus	***		-		X \$ 100 =		OR	X \$ 200 =		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				AIM		┢	+ \$ 180 =		OR			
							_	OTAL ADDIT.		OR	+ \$ 360 =	•	
		•		•		•		FEE L		UK.	FEE		
** If	the "Highest Nur	mn 1 is less than the mber Previously Pak mber Previously Paid ber Previously Paid	For In This SPA	ACE is less the	an '20',	enter "20".							

FORM PTO-875 (Rev. 02/2005)